## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

## ATTORNEY DOCKET NO. 10013460-1

As a below named inventor. I hereby declare that:

As a below flatficu filventor, i					
My residence/post office address					
I believe I am the original, firs and joint inventor (if plural nar a patent is sought on the inve	mes are listed below) of ntion entitled:	the subject matter w	hich is claimed	and for which	
Systems and Methods for Cor	trolling the Presentation	n of a Hierarchical Arra	angement of It	ems in a Windo	
of a Graphical User Interface the specification of which is a	Harbard Barreta contacts t	he fellowing boy is ob	ankad:		
( ) was filed on	as US Application No. or PCT International Application and was amended on (if applicable).				
	<del></del>				
I hereby state that I have revincluding the claims, as amer disclose all information which	nded by any amendmen	nt(s) referred to above	. Lacknowiec	d specification, Ige the duty to	
Foreign Application(s) and/or Claim of	f Foreign Priority				
I hereby claim foreign priority benefit inventor(s) certificate listed below an a filing date before that of the applica-	d have also identified below a	any foreign application for p	ny foreign applicat patent or inventor(:	ion(s) for patent or s) certificate having	
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED L	JNDER 35 U S C 119	
			YES	NO	
CON .			YES	NO	
Provisional Application					
hereby claim the benefit under Title below:	e 35, United States Code Se	ction 119(e) of any United	States provisional	application(s) listed	
	APPLICATION NUMBER	FILING DATE			
AJ					
1					
U. S. Priority Claim In hereby claim the benefit under Titl insofar as the subject matter of eac manner provided by the first paragra- information as defined in Title 37. application and the national or PCT i	h of the claims of this applica aph of Title 35, United States ode of Federal Regulations, S	ation is not disclosed in the s Code Section 112, I ackn ection 1 56(a) which occur	e prior United State low ledge the duty	es application in the to disclose material	
APPLICATION NUMBER	FILING DATE	STATUS (p	atented/pending/abando	ned)	
POWER OF ATTORNEY: As a named inventor, I hereby app business in the Patent and Trademan	rk Office connected therewith	s) and/or agent(s) to prose  Place Customer Number Bar Code Label here	ecute this applicat	ion and transact al	
Send Correspondence to: HEWLETT-PA CKARD COMPANY Intellectual Property Administration		Direct Telephone Calls To: Steven R. Ormiston			
P.O. Box 272400		(208) 396-254	14		
Fort Collins, Colorado 80527-2	400	, ,			
I hereby declare that all statemade on information and be with the knowledge that wimprisonment, or both, under	elief are believed to be willful false statements	true; and further that and the like so ma	it these statem ade are punish	nents were mad nable by fine o	

falso statements may jeonardize the validity of the application or any patent issued thereon

raise statements may jeopardize the validity of the applica	tion of any patone locate the earn
Full Name of Inventor: Kram Henry Allen	Citizenship: United States
Residence: 2344 N. Ayrshire Place, Meridian, Ida	ho 83642
Post Office Address: same	
Mentor's Strature aller	10/30/01 Date

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10013460-1

Full Name of # 2 joint inventor:	Linn James Kropf		Citizenship: United States		
Residence:	5217 N. Conditation Assessed Balance Idaha 92712				
	same				
Zan Kana Kul		10/30/ Date	/oi		
Inventor's Signature		Date /			
Full Name of # 3 joint inventor:	: Clifford Lee Coppinger		Citizenship: United States		
Residence:	157 S. Cromwell Place, Boise	, Idaho 8370	09		
Post Office Address:	same				
Collonal Lee Con	paring	Date	30/01		
invertion's Signature	TT V	Date /	7		
Full Name of # 4 joint inventor			Citizenship:		
Residence:					
Post Office Address:					
Inventor's Signature		Date			
inventor a digitature		Date			
	r:		Citizenship:		
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 6 in int invento			Citizenship:		
Full Name of # 6 joint invento	or:		Citizenship.		
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of #7 joint inventor	or:		Citizenship:		
Residence:					
Post Office Address:					
. to. Office Address.					
Inventor's Signature		Date			
Full Name of #8 joint invent	tor:		Citizenship:		
Residence:					
Post Office Address:					
Inventor's Signature		Date	-		